Dept. of Expenditure, Ministry of finance has laid down the norms for opening of CGHS Allopathic dispensaries in its report of November, 1999. As per these norms, a minimum of 2000 cardholders (both serving and pensioners) which comes to 10,000 beneficiaries are required for opening of a new CGHS Allopathic dispensary. For extension of CGHS to a new city, at least three dispensaries are to be opened and hence 6000 cardholders or 30,000 beneficiaries are necessary. However, due to paucity of resources, it has not been possible to open new CGHS dispensaries in all uncovered areas even if the norms of card holders are fulfilled. To reduce over crowding and the long waiting list for getting admission/ treatment at Govt, hospitals, the Govt, had decided to recognise private hospitals in CGHS covered cities to enable CGHS beneficiaries avail their services.

(b) At present, CGHS is available in only 23 cities in the country and in the other ares, CS (MA) Rules, 1944, are applicable.

(c)The services provided through CGHS dispensaries are generally up to the satisfaction of the beneficiaries. Further, CGHS dispensaries are regularly inspected and monitored by the concerned Additional Directors/Joint Directors who function as Head of the CGHS Organization in various CGHS covered cities.

Health care for women

498. SHRI LAJPAT RAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that India has a large percentage of female population in above 45 years segment but the focus of health care for women is still limited to child birth and initial post child birth years;

(b) if so, the factors responsible for such a situation; and

(c) the efforts being made to expand and extend various medical services/health care to women at large?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Based on the data on Maternal Mortality Ratio (MMR) provided by the Sample Registration System-1998, of the Registrar General of India, it is estimated that about

1.1 lakh women in India die every year due to causes related to pregnancy and child birth. Current strategies and programmes like Reproductive and Child Health Programme have therefore been adressed primarily to bringing about a reduction in the MMR and Infant and neonatal mortality.

Women above the age of 45 years from about 17% of the population. Evidence is also increasingly becoming available that hormonal and metabolic disorders and micro-nutrient deficiencies like V'rtamin-D, cervical and breast cancers contribute to morbidity among women. Services for these ailments are being provided through the hospitals and other health care facilities. The Working Group on "Health Care for Women and Children" constituted by Planning Commission for Tenth Five Year Plan has also recommened adoption of a holistic life cycle approach towards women health, menopause, infertility, cervical and breast cancer etc.The National Population Policy-2000 also highlights the heed for sensitizing, training and equipping rural need for sensitizing, training and equipping rural hospitals and health centres for providing geriatric care.

Survey under national programme for control of Blindness

499. SHRI RAMA MUNI REDDY SIRIGIREDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the survey under the National Programme for Control of Blindness has been completed;

(b) if so, the details of the survey; and

(c) the details of the States from which data has been collected?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. R&JA): (a) Yes, Sir.

(b) and (c) The survey has been undertaken in 15 randomly selected districts, one each from the States of Himachal Pradesh, Punjab, Uttar Pradesh, Bihar, West Bengal, Orissa, Madhya Pradesh, Rajasthan, Gujarat, Maharashtra, Chattisgarh, Andhra Pradesh, Karnataka, Tamil Nadu and Kerala. A total 72,008 persons aged 50 years and above were examined to find out prevalence and causes of blindness. The prevalence rate was 8.3% in population aged 50 years and above. Estimated prevalence of blindness in general population is 1.08%. Important causes of blindness were Cataract (63.5%) and Refractive Errors (27.6%).